

**District Summary Report  
Advanced Placement Challenge Grant (APCG)  
First Year Final Expenditure Report  
July 1, 2000 – June 30, 2002**

District: \_\_\_\_\_ County: \_\_\_\_\_

High Schools: \_\_\_\_\_

Person Completing Form: \_\_\_\_\_ Phone: \_\_\_\_\_

First Year Budget = \$30,000 x # of funded schools.

\_\_\_\_\_ x \$30,000 = Grant Amount: \$ \_\_\_\_\_

*This expenditure report must be completed by the district with totals for all APCG high school(s)*

<b><i>Expense Category</i></b>	<b><i>Total District Budget Amount</i></b>	<b><i>Total District Amount Expended</i></b>	<b><i>Total District Balance</i></b>
1000 Certificated Salaries			
2000 Classified Salaries			
3000 Employee Benefits			
4000 Books and Supplies			
5000 Services and Other Operating Expenses			
6000 Capital Outlay			
<b>SUBTOTAL</b>	\$	\$	\$
7000 Indirect Cost equals Subtotal minus Capital Outlay multiplied by the Indirect Rate			
<b>TOTAL EXPENDITURES IN 2001-02</b>	\$	\$	\$

NOTE: 1<sup>st</sup> YEAR FUNDS MUST BE EXPENDED OR ENCUMBERED BY JUNE 30, 2002.  
REMAINING 1<sup>st</sup> YEAR FUNDS WILL REVERT BACK TO THE STATE.

Grantee certifies that the above expenditures have been made and that this project has been conducted in accordance with all requirements included in the Grant Award.

**Submit no later than August 2, 2002 to:**

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Printed Name/Title

\_\_\_\_\_  
Date

California Department of Education  
Intersegmental Relations Unit  
P.O. Box 944272  
Sacramento, CA 94244-2720  
Attn: Eva Schrepel  
Telephone No.: (916) 323-5146  
Fax No.: (916) 323-2817

This form will be available online in April ([www.cde.ca.gov/pr/ap](http://www.cde.ca.gov/pr/ap)).